2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000024349

FILED May 05, 2001 8:00 am

1. Entity Name VF GALT OCEAN, INC.				Secretary of State 05-05-2001 90585 001 *4,950.00			
ce of Business D CASSEL ROAD. SUITE 300 FL 33434	Mailing Address % BROAD AND CASSEL 7777 GLADES ROAD. SUITE 300 BOCA RATON FL 33434			40688			
Place of Business	3. Mailing Address						
i. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS	SPACE		
ite	City & State		4.	FEI Number 65-0574340		pplied For ot Applicable	
Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 Ad	ditional	
6. Name and Address of Curren	t Registered Agent	Nama	7.	Name and Address of New Registered	Agent		
POWERS, DAVID J ESQ. % BROAD AND CASSEL 7777 GLADES ROAD, SUITE 300			Address (P.O. Box Number is Not Acceptable)				
CA RATON FL 33434		City		FI	Zip Cod	le	
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State		10. Election Campaign Financing		00 May Be	
		12.		 DITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 11	
PSD POMERANTZ, SAUL 8600 DECARIE BLVD. STE 200 TOWN OF MT ROYAL QC	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TVD GATTINGER, FRANK 8600 DECARIE BLVD. STE 200 TOWN OF MT ROYAL QC	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
ASD ESPOSITO, RALPH JR 8600 DECARIE BLVD #200 MT ROYAL, QC, CANADA	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		,	☐ Change	Addition	
	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
	☐ Delete	TITLE NAME STREET ADDRESS			Change	☐ Addition	
	Ce of Business C CASSEL ROAD. SUITE 300 FL 33434 Place of Business #, etc. # Country 6. Name and Address of Curren VERS, DAVID J ESQ. ROAD AND CASSEL GLADES ROAD, SUITE 300 FA RATON FL 33434 # named entity submits this statement ff Signature, typed or printed name of registered agen pration is eligible to satisfy its Intangible requirement and elects to do so. ria on back) OFFICERS AND PSD POMERANTZ, SAUL 8600 DECARIE BLVD. STE 200 TOWN OF MT ROYAL QC TVD GATTINGER, FRANK 8600 DECARIE BLVD. STE 200 TOWN OF MT ROYAL QC ASD ESPOSITO, RALPH JR 8600 DECARIE BLVD #200	T OCEAN, INC. Ce of Business D CASSEL ROAD. SUITE 300 FL 33434 Place of Business #, etc. Country Country	T OCEAN, INC. De of Business D CASSEL ROAD SUITE 300 FL 33434 ROAD SUITE 300 ROAD AND CASSEL Country Country	TOCEAN, INC. De of Business De CASSEL TYTT GLADES ROAD, SUITE 300 BOCA RATON FL 33434 Place of Business 3. Mailing Address BOCASSEL TYTT GLADES ROAD, SUITE 300 BOCA RATON FL 33434 Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. Ide Country Zip Country Zip Country Sireet Address of Current Registered Agent Name Street Address (P.O.) ARATON FL 33434 City Paramed entity submits this statement for the purpose of changing its registered office or registered agent and title of applicable. Paramed entity submits this statement for the purpose of changing its registered office or registered agent and title of applicable. Paramed entity submits this statement for the purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered office or registered agent and a purpose of changing its registered agent and a purpose of changing its registered agent and a purpose of	Do S-05-2001 90585 0 0 CASSEL 9 RADAD MID CASSEL 777 GLADES ROAD. 18 Country 19 Country 27 D 10 Country 27 D 10 Country 37 D 10 Country 4. FEI Number 65-0574340 10 Norm 10 Country 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent 17. Name and Address of Status Desired 18 City & State 19 Country 19 Country 19 Country 19 Country 19 Country 27 Country 27 Country 28 Country 3. Mailing Address 4. FEI Number 65-0574340 10 Norm 10 Nor	OS-05-2001 90585 001 *4,950 DoSSE	

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: